1 FILED 2 ئى ئىلى ئىدىدۇرىي 3 RICHARD W. WIEKING CLERK, U.S. DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA 4 5 6 7 8 UNITED STATES DISTRICT COURT 9 DENITE RAY BAKNETT) 10 11 Plaintiff. 12 PRISONER'S 13 14 Defendant, 15 I, DENITS RAY BARNET, declare, under penalty of perjury that I am the 16 plaintiff in the above entitled case and that the information I offer throughout this application 17 is true and correct. I offer this application in support of my request to proceed without being 18 required to prepay the full amount of fees, costs or give security. I state that because of my 19 poverty I am unable to pay the costs of this action or give security, and that I believe that I am 20 21 entitled to relief. 22 In support of this application, I provide the following information: Are you presently employed? Yes X No ____ 23 If your answer is "yes," state both your gross and net salary or wages per month, and give the 24 name and address of your employer: 25 Gross: #.18 hour Net: #.09 hour
Employer: Inmate in C.D.C. 26

27

28

1	If the answer is "no," state the date of last employment and the amount of the gross and net									
2	salary and wages per month which you received. (If you are imprisoned, specify the last									
3	place of employment prior to imprisonment.)									
4	JAMES LTO YEUR STORE, AND ALSO HUS ONE tO GOOD W									
5	CO, MINITAMINA NIGOS \$3,00 Optivis Dollars I can't remained I think									
6	1979 AND 1982 TOWN SONY I CAN'T REMEMBER PROBRE FOR STREME									
7	2. Have you received, within the past twelve (12) months, any money from any of the									
8	following sources:									
9	a. Business, Profession or Yes No									
10	self employment									
11	b. Income from stocks, bonds, Yes No 🔀									
12	or royalties?									
13	c. Rent payments? Yes No									
14	d. Pensions, annuities, or Yes No									
15	life insurance payments?									
16	e. Federal or State welfare payments, Yes No 🔀									
17	Social Security or other govern-									
18	ment source?									
19	If the answer is "yes" to any of the above, describe each source of money and state the amount									
20	received from each.									
21	- MAI LONE									
22										
23	3. Are you married? Yes No X									
24	Spouse's Full Name:									
25	Spouse's Place of Employment:									
26	Spouse's Monthly Salary, Wages or Income:									
27	Gross \$NNY Net \$NONY									
28	4. a. List amount you contribute to your spouse's support:\$									

,· <u>1</u>	b. List the persons other than your spouse who are dependent upon you for
2	persons outer than your spouse who are dependent upon you for
3	support and indicate how much you contribute toward their support. (NOTE:
4	For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).
5	NONE
6	
7	5. Do you own or are you buying a home?
8	5. Do you own or are you buying a home? Yes No _ Estimated Market Value: \$ Amount of Mortgage: \$
9	
10	6. Do you own an automobile? Yes No Y
10	Make Year Model
12	
	Monthly Payment: \$
13	7. Do you have a bank account? Yes No 😾 (Do not include account numbers.)
14	Name(s) and address(es) of bank:
15	Present balance(s): \$
16	
17	Do you own any cash? Yes No Amount: \$
18	Do you have any other assets? (If "yes," provide a description of each asset and its estimated
19	market value.) Yes No
20	
21	8. What are your monthly expenses?
22	Rent: \$ NONE Utilities: NONE
23	Food: \$ NONE Clothing: NONE
24	Charge Accounts:
25	Name of Account Monthly Payment Total Owed on This Acct.
26	NOME 8 6 8 0
27	NONE \$ 5
28	NONE \$ 9. DO
PRIS. APP. TO PRO	C. IN FORMA PAUPER IS, Case No 3 -

1	you have any other debts? (List current obligations, indicating amounts and to whom they are
2	
3	NOME
4	
5	10. Does the complaint which you are seeking to file raise claims that have been presented
6	
7	Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
8	which they were filed.
9	NORE
10	
11	l consent to prison officials withdrawing from my trust account and paying to the court
12	the initial partial filing fee and all installment payments required by the court.
13	I declare under the penalty of perjury that the foregoing is true and correct and
14	understand that a false statement herein may result in the dismissal of my claims.
15	(number of
16	MARCH 02) 2008 Denny Hay BOUT
17	DATE SIGNATURE OF APPLICANT
18	
19	
20	
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Document 3

Case 5:08-cv-01604-RMW

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Filed 03/24/2008

1	
2	Case Number: 19932/
3	·
4	
5	
6	
7	
8	
9	CERTIFICATE OF FUNDS
10	IN
11	PRISONER'S ACCOUNT
12	
13	I certify that attached hereto is a true and correct copy of the prisoner's trust account
14	statement showing transactions of BARNETT DENNIS for the last six months
15	at
16	[prisoner name]
17	where (s)he is confined.
18	[name of institution]
19	I further certify that the average deposits each month to this prisoner's account for the
20	most recent 6-month period were \$ 8.93 and the average balance in the prisoner's
21	account each month for the most recent 6-month period was \$_//.54
22	0
23	Dated: 3-7-08 . Novala
24	[Authorized officer of the institution]
25	
26	
27	
28	
1	

Case 5:08-cv-01604-RMW Document 3 Filed 03/24/2008 Page 6 of 14

收心 REPORT ID: TSB030 .701

REPORT DATE: 03/07/08 PAGE NO:

CALIFORNIA DEFARTMENT OF CORRECTIONS CALIFORNIA MEDICAL FACILITY INMATE TRUST ACCOUNTING SYSTEM INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: OCT. 07, 2007 THRU MAR. 07, 2008

ACCOUNT NUMBER : 077539

BED/CELL NUMBER: MIP100000000112L

ACCOUNT NAME : BARNETT, DENNIS RAY

ACCOUNT TYPE: I

PRIVILEGE GROUP: A

TRUST ACCOUNT ACTIVITY

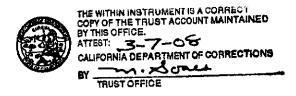
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C.
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* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 10/24/95 CASE NUMBER: 176225

COUNTY CODE: SCL FINE AMOUNT: \$ 500.00

DATE	TRANS.	DESCRIPTION		TRANS. AMT.	BALANCE
10/07/2007	BEGINNI	NG BALANCE			112.75
11/06/07 12/05/07 01/08/08	VR54 VR54 VR54	RESTITUTION RESTITUTION	DEDUCTION-SUPPORT DEDUCTION-SUPPORT DEDUCTION-SUPPORT	11.16- 11.05- 12.89-	101.59 90.54 77.65
02/05/08 03/05/08	VR54 VR54		DEDUCTION-SUPPORT DEDUCTION-SUPPORT	13.50- 10.89-	64.15 53.26



REPORT ID: T53030 .701

REPORT DATE: 03/07/08 PAGE NO:

CALIFORNIA MEDICAL FACILITY INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: OCT. 07, 2007 THRU MAR. 07, 2008

ACCT: C77539

ACCT NAME: BARNETT, DENNIS RAY

ACCT TYPE: I

- * THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT *
- * IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED.

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
22.73	53.58	60.66	15.65	0.00	0.00
	*				

THE WITHIN INSTRUMENT IS A CORNECTION OF THE TRUST ACCOUNT MAINTAINED BY THIS OFFICE. ATTEST: 3-7-08- CALIFORNIA DEPARTMENT OF CORRECTIONS BY
TRUST OFFICE

CURRENT AVAILABLE BALANCE 15.65 缺色

REPORT ID: T53030 .701

REPORT DATE: 03/07/08

PAGE NO:

CALIFORNIA DEPARTMENT OF CORRECTIONS CALIFORNIA MEDICAL FACILITY INMATE TRUST ACCOUNTING SYSTEM INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: OCT. 07, 2007 THRU MAR. 07, 2008

ACCOUNT NUMBER: C77539

BED/CELL NUMBER: MIP100000000112L

ACCOUNT NAME : BARNETT, DENNIS RAY

ACCOUNT TYPE: I

PRIVILEGE GROUP: A

TRUST ACCOUNT ACTIVITY

	TRAN		141091	U. C. C. C. C. S. 4. T.	12 (- 1	IATI		
DATE	CODE	DESCRIPTION	COMMENT	CHECK	NUM	DEFOSITS	WITHDRAWALS	BALANCE
							Safety games formers haven debt and some white haden have had	
10/07	/2007	BEGINNING B	ALANCE					22.73
10/11	W425	DONATION-A A	1028POPEYE				21,25	1.48
10/25	W515	COPY CHARGE	1158/COPY				0.60	0.88
11/06	*VD54	INMATE PAYROL	1236OCT149			10.05		10,93
12/03	W515	COPY CHARGE	1443/COPY				4.80	6.13
12/05	*VD54	INMATE PAYROL	1484NOV125			9.95		16.08
12/13		DRAW-FAC Z	1565/CMF#2				16.08	0.00
	IVITY	FOR 2008						
01/08		INMATE PAYROL	1684DEC103			11.62		11.62
			1694/COPY				4.50	7.12
01/28		CASH WITHDRAW		298364	452		7.12	0.00
02/06		INMATE PAYROL				12.15		12.15
03/04		POSTAGE CHARG	2158/PSTGE				1.31	10.84
03/05		INMATE PAYROL	2162/FEB47			9.81		20.65
03/06	W536	COPAY CHARGE	2186/02-21				5.00	15.65

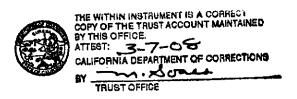
* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 10/24/95 CASE NUMBER: 176225

COUNTY CODE: SCL

FINE AMOUNT: \$ 500.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
~~~~~	### <del>### ### ****</del>	and her than the stage area and the stage and the stage area and the stage area and the stage are also and the stage area.	THE MAN YOUR SHOP WITH THE THE MAN THE THE	
10/07/2007	BEGINNI	NG BALANCE		112.75
11/06/07	VR54	RESTITUTION DEDUCTION-SUPPORT	11.16-	101.59
12/05/07	VR54	RESTITUTION DEDUCTION-SUPPORT	11.05-	90.54
01/08/08	VR54	RESTITUTION DEDUCTION-SUPPORT	12.89-	77.65
02/06/08	VR54	RESTITUTION DEDUCTION-SUPPORT	13.50-	64.15
03/05/ <b>08</b>	VR54	RESTITUTION DEDUCTION-SUPPORT	10,89-	53.26



#### Case 5:08-cv-01604-RMW Document 3 Filed 03/24/2008 Page 10 of 14

REPORT ID: T53030 .701

REPORT DATE: 03/07/08 PAGE NO:

CALIFORNIA MEDICAL FACILITY INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: OCT. 07, 2007 THRU MAR. 07, 2008

ACCT: C77539

ACCT NAME: BARNETT, DENNIS RAY

ACCT TYPE: I

- * THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT *
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# TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
22.73	53.58	60.66	and the day and the part of the part of		
		90.00	15.65	0.00	0.00
			بيوي موند مست خليد وجيد شاهد طلقت محيد حقور بينو سند خابد بودر سند.		

THE WITHIN INSTRUMENT IS A CORRECT COPY OF THE TRUST ACCOUNT MAINTAINED BY THIS OFFICE. ATTEST: 3-7-08
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY TRUST OFFICE

CURRENT AVAILABLE BALANCE

15.65

REPORT ID Cases 598-cv-91604-RMW Document 3 Filed 03/24/2008 Page 11 of 14 REPORT DATE: 03/07/08 PAGE NO: 1

# CALIFORNIA DEPARTMENT OF CORRECTIONS CALIFORNIA MEDICAL FACILITY INMATE TRUST ACCOUNTING SYSTEM INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: OCT. 07, 2007 THRU MAR. 07, 2008

ACCOUNT NUMBER: C77539

ACCOUNT NAME : BARNETT, DENNIS RAY

BED/CELL NUMBER: MIP10000000112L

FINE AMOUNT: \$ 500.00

ACCOUNT TYPE: I

PRIVILEGE GROUP: A

### TRUST ACCOUNT ACTIVITY

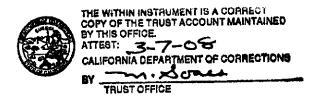
	TRAN						
DATE	CODE	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
10/07	/2007	BEGINNING B	ALANCE		The last last last and add last value and any	and him own was take topy was take tipe was made.	22.73
10/25 11/06: 12/03 12/05: 12/13 ACTI 01/08: 01/08 01/28 02/06:	W515 VD54 FC02 VITY VD54 W515 W415 VD54 W502		1443/COPY 1484NOV125 1565/CMF#2 1684DEC103 1694/COPY 1872/CKREQ 1960JAN115 2158/PSTGE	298364452	10.05 9.95 11.62 12.15	21.25 0.60 4.80 16.08 4.50 7.12	1.48 0.88 10.93 6.13 16.08 0.00 11.62 7.12 0.00 12.15 10.84
			2186/02-21		9.81	5.00	20.65 15.65

# * RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 10/24/95 CASE NUMBER: 176225

COUNTY CODE: SCL

	DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
_	10/07/2007	BEGINNI	NG BALANCE		112.75
_	11/06/07 12/05/07 01/08/08 02/06/08 03/05/08	VR54 VR54 VR54 VR54 VR54	RESTITUTION DEDUCTION-SUPPORT RESTITUTION DEDUCTION-SUPPORT RESTITUTION DEDUCTION-SUPPORT RESTITUTION DEDUCTION-SUPPORT RESTITUTION DEDUCTION-SUPPORT	11.16- 11.05- 12.89- 13.50- 10.89-	101,59 90.54 77.65 64.15 53.26



REPORT ID: Case 5:98-cv-91604-RMW Document 3 Filed 03/24/2008

Page 12 of 14 REPORT DATE: 03/07/08 PAGE NO:

CALIFORNIA MEDICAL FACILITY INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: OCT. 07, 2007 THRU MAR. 07, 2008

ACCT: C77539

ACCT NAME: BARNETT, DENNIS RAY

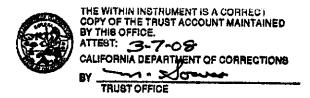
ACCT TYPE: I

* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT *

* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED.

### TRUST ACCOUNT SUMMARY

•	22.73	53.58	60.66	15.65	0.00	0.00
_	BEGINNING	TOTAL	TOTAL	CURRENT	HOLDS	TRANSACTIONS
	BALANCE	DEPOSITS	WITHDRAWALS	BALANCE	BALANCE	TO BE POSTED



CURRENT AVAILABLE BALANCE 15.65

# INMATE REQUEST FOR INTERVIEW

TO: TRUST OFFICE			Date: FCBPA	HRY 27, 2008
From: BARNETT DENIE	S C-77539 (Number)	P-1/2-LOWER (N)	FT. P. WING F	712-COW(1)
Work Assignment MATH KHOLD BUT Other Assignment NH (School, Therap)	CHEN SHOP Job	Hours 07:45 AM1	To 15:115 P	<u>M</u>
Kindly explain in detail your reason to the matter cannot be handled by corre PLASE I NEO ATRUE AND CORRECT O USE (1) STX MONTS. I WINT TO SE PLY FOR THE COURT FACTURE PEOPLE WESTELL SANJULY TO THE LAW (DO N	ospondence. Unless you COPY OF MY TRUST A MA Q COPY OF MY TRU USC THANK VOU P	r problem is stated clear COUNT STUTCHMUT S IST ACCOUNT STUTCH LEUS TRYST OFFICE AS PRESIDE PLOUSE	howing TRANSACI LEMIT to the FERE Please PO Huls TRANK YOU BOL	FOR SENT H
Interviewed By:			Date:	
Disposition:				

GA-22

I have a court deadutive and it expired on APPI 11,2008 Please TUM ASKING YOU to DO HUS AS AFAVOR FOR ME Please to a Rush this regular place and THANK YOU again I DO Appreciate this HELP IN this mutter